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SCANNED MAR 1 4 2011

Form **990**

Department of the Treasury

Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

benefit trust or private foundation)
 The organization may have to use a copy of this return to satisfy state reporting requirements

20**09**

Open to Public Inspection

	FOI LI	te 2009 C	alerioar	year, or tax year begin			, and ending	Septe		20 10	
В	Check if	applicable	Please	C Name of organization A	merican Center for	Mongolian Mongolian	Studies		D Employer	dentification	number
	Address	s change	use IRS label or	Doing Business As					55	07992	11
	Name o		print or	Number and street (or P O	box if mail is not delivered to	street address)	Room/suite	•	E Telephone	number	
	Initial re		type See	1155 Observatory D	Or.		Rm	. 333	(360)	356-10	20
	Termina		Specific Instruc-	City or town, state or co	ountry, and ZIP + 4						
		ed return	tions	Madison, WI 53706					G Gross recei	pts \$	43,027
		on pending	F Nan	me and address of principal	officer Charles Kru	sekopf		H(a) Is this	a group return for	r affiliates? Yes	s No
	*F	- p 5	same	as C above		•			-	luded? Tyes	
1	Tax-ex	empt status	s 7 5	501(c) (3)◀ (insert no)	4947(a)(1) or	527		1		t (see instruct	
J	Webs	ite: ► w\		ngoliacenter.org				_	exemption number	•	·
K				oration Trust Associati	on ☐ Other ▶	LY	ear of formatio			gal domicile 7	TX
Р	art I	Summ	nary			•			·		
	1			the organization's m	ssion or most signif	icant activiti	os Promo	ting schol	arship abo	ut Mongoli	ia,
	1 7	support	ting aca	ademic research, ope	erating an academi	c resource	center in Ul	aanbaatar	. Mongolia	and publi	 C
ည်				educational activities							
Activities & Governance							erramiai.				
Š	2	Chack this	hov N	☐ If the organization disc	ontinued its operations of	dienosad of m	ore than 25%	of ite not see	ote		
ĕ	3			ng members of the go							40
9	3										40
i.	-			ependent voting memb f employees (Part V, I	_				5		3
Ę	5 6			f volunteers (estimate	•				6		-0-
٩				elated business reven					7a	-	-0-
				eiated business reven business taxable incon			le 12, , ,		7b		-0-
_	 ~	7101 01110	natoa b	don'todo taxable incom	10 110111 7 01111 000 1	1110 04.	· · · · · · · · · · · · · · · · · · ·	Prior Ye		Current Y	
		Contribu	itions o	ad areate (Deet VIII. I	a a 1 h)		<u> </u>		401.867		31,335
9	8			ind grants (Part VIII, III		· · · -		18,422		11,095	
Revenue	9		vestment income (Part VIII, Inte 29)								597
å	10				4,785 -0-		-0-				
	11 12	Total revi	enue –	Part VIII, co lumn (A), add lines 8 through 11,	must empel Part VIII	column (A) 1	line 12)		431,751		43,027
_	10	Outstand	chac q	amounts paid (Pa	Color Color (A)	column (A), i	1116 12)	 	85,056	 	56,250
							· · ·	······································	-0-		-0-
of.	14	Benefits	paid to	or for members-(Par	Column (A), line	: 4)	· · ⊢		72,959		80,307
200	15	Salaries,	otner co	ompensayor @ fine Wes	Denetits (Fart IX, co				-0-	· · · · · · · · · · · · · · · · · · ·	-0-
Exnenses	16a			ndraising fees (Part IX,			·-o-		-0-		-0-
ш				g expenses (Part IX, co					144 205		70.076
				s (Part IX, column (A),					144,305		70,976
				. Add lines 13–17 (mu		umn (A), line	e 25).		302,320 129,431		207,533
<u> </u>	8 19	nevenue	1635 64	penses Subtract line 1	TO HOHT IIIIE 12		· · ·	eginning of C		End of Ye	<u>64,506)</u>
sts (Š a	-	. (5)				F ²				
Assets or	20			art X, line 16)			· · · -		366,267 14,105		201,475
Net A	21 22		•	(Part X, line 26) und balances. Subtrad	at line 21 from line 2		· · · -		352,162		13,819 187,656
	art II			Block	t line 21 noni line 2	. <u>u</u>	_ <u>· · · · · h</u>		332,102	<u></u>	167,030
	ui (ii			of perjury, I declare that I have	e examined this return in	chiding accome	anving schedu	les and states	ments and to t	he hest of my	knowledge
				ue, correct and complete [
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Form **990** (2009)

Par	t III Statement of Program Service Accomplishments
1	Briefly describe the organization's mission:
	The American Center for Mongolian Studies is an academic organization promoting scholarship and research
	about and in Mongolia. The organization provides support services to students and faculty conducting study or research in Mongolia at its full service resource center and library in Mongolia. It also conducts a variety of public
	outreach and educational activities including lectures and language training.
2	Did the organization undertake any significant program services during the year which were not listed on
_	the prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O
3	Did the organization cease conducting, or make significant changes in how it conducts, any program
	services?
	If "Yes," describe these changes on Schedule O.
4	Describe the exempt purpose achievements for each of the organization's three largest program services by expenses Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and
	allocations to others, the total expenses, and revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$46,538 including grants of \$250) (Revenue \$0)
	Resource Center and Library in Mongolia: the ogranization maintains a fully staffed resource center and research
	library in Ulaanbaatar, Mongolia. The center is housed in the Mongolian University of Science and Technology library
	building and is overseen by a full-time Resident Director who is a US citizen. The Resident Director is supported by a full-time US Director hosted at the Center for East Asian Studies at University of Wisconsin-Madison. Primary
	support for the center comes from the US Department of Education, US Department of State, Henry Luce Foundation,
	and donations. The resource center offers visiting US and international scholars a comfortable research
	environment which includes computers, office equipment, and a research library collection with over 3,000 volumes.
	The organization regularly acquires new books for the library in both the US and Mongolia. Grants supporting these
	activities in the current year were received at the beginning of fiscal year 2010 (October 2009).
	•••••••••••••••••••••••••••••••••••••••
4h	(Code:) (Expenses \$ 58,800 including grants of \$ -0-) (Revenue \$ -0-)
7.0	Fellowships/Conferences/Lectures: the organization supported 4 fellowship programs with grant funds received at
	the beginning of fiscal year 2010 (October 2009) and in fiscal year 2009 (March 2009) from the US State Department
	and Henry Luce Foundation, respectively. The programs provided \$56,250 in fellowship awards to 11 US students
	and faculty, 1 Canadian student, and 1 French Student. The four programs support field research and language
	acquisition for students and faculty. In addition, the organization held conferences and public lectures in Mongolia
	in support of the fellowship programs and as part of the organization's public outreach goals. These activities were organized by staff in Mongolia.
	organized by stan in mongona.
4-	(Code 17.661 relates weeks (C. 20.000) (Code 20.000)
4C	(Code:) (Expenses \$ 17,661 including grants of \$ 30,000) (Revenue \$) Digital Library Development: The organization provides technical expertise to the Digital Library for International Re-
	search (DLIR). The US Director is the primary contributor to this project, and grants received from the Council for
	American Overseas Research Centers (CAORC) cover half of his salary. The DLIR is a consortium of Overseas
	Reseach Centers (ORCs) aimed at creating a unified collection of digital objects held at ORCs such as the American
	Center for Mongolian Studies (ACMS). ACMS is an active member of DLIR, contributing to the union catalog and
	digtial archive (www.dlir.org). ACMS has distinguished itself as a leader in the consortium in terms of technical
	innovation. In the coming year ACMS will also receive a subgrant from the DLIR to digitize rare manuscripts held in
	Mongolia.
	•••••••••••••••••••••••••••••••••••••••
4d	Other program services (Describe in Schedule O)
	(Expenses \$ 24,101 including grants of \$ 85) (Revenue \$ 11,692)
40	Total program service expenses ► 147 100

Par	t IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	✓	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	✓	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		1
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		1
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		✓
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III.	8		1
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		1
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		1
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VIII, IX, or X as applicable	11		✓
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.			
•	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.			
•	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.			
•	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX			
•	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X. Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X.			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12		✓
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional			
13 14a	Is the organization a school described in section $170(b)(1)(A)(u)$? If "Yes," complete Schedule E Did the organization maintain an office, employees, or agents outside of the United States?	13 14a	1	✓
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? <i>If "Yes," complete Schedule F, Part I</i>	14b	1	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		1
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16	1	
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		/
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If</i> "Yes," <i>complete Schedule G, Part II</i>	18		1
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
00	If "Yes," complete Schedule G, Part III	19		 √
<u> 20</u>	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20	Ļ	

Pa	Checklist of Required Schedules (continued)			,
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		1
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	1	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		✓
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25	24a		√
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If</i> "Yes," <i>complete Schedule L, Part I</i>	25a		1
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		1
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		✓
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		√
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		√
С	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		✓
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		✓
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		1
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		1
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		1
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		1
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		1
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35		✓
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		1
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
	Part VI	37	ļ	✓
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	1	
		_		

Par	Statements Regarding Other IRS Filings and Tax Compliance					
			ı	Same ato.	Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of					
	U.S Information Returns Enter -0- if not applicable	1a 1b	-0- -0-			
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable					
С	Did the organization comply with backup withholding rules for reportable payments to vendo gaming (gambling) winnings to prize winners?	rs and 	reportable · · ·	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	22	3			
h	Statements, filed for the calendar year ending with or within the year covered by this return. If at least one is reported on line 2a, did the organization file all required federal employments.	2a	v returne?	2b	1	
U	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file			18.00		
_	instructions)					
	Did the organization have unrelated business gross income of \$1,000 or more during the this return?			3a		✓
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedul			3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature over, a financial account in a foreign country (such as a bank account, securities account, account)?			4a	✓	
b	If "Yes," enter the name of the foreign country Mongolia		•••••			
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report and Financial Accounts.	of Fo	reign Bank			
	Was the organization a party to a prohibited tax shelter transaction at any time during the			5a		√
	are any management of the aparty to a promotion tax of			5b		✓
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Prohibited Tax Shelter Transaction?			5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,0			6a		✓
	organization solicit any contributions that were not tax deductible?					
b	If "Yes," did the organization include with every solicitation an express statement that such gifts were not tax deductible?	cont	ributions or	6b		a c
7	Organizations that may receive deductible contributions under section 170(c).					
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and	partly	for goods	70		-
h	and services provided to the payor?			7a 7b		_
	If "Yes," did the organization notify the donor of the value of the goods or services provid Did the organization sell, exchange, or otherwise dispose of tangible personal property					
	required to file Form 8282?		· · · ·	7c	2.00	✓
	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiur benefit contract?	ns on 	a personal	7e		V
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal b			7f		✓
_	For all contributions of qualified intellectual property, did the organization file Form 8899 a	-		7g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a required?	Form	1098-C as	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a organizations. Did the supporting organization, or a donor advised fund maintained by					
	organization, have excess business holdings at any time during the year?			8	- X * - 3888 S S	
9	Sponsoring organizations maintaining donor advised funds.					
a	Did the organization make any taxable distributions under section 4966?			9a 9b		
b 10	Did the organization make a distribution to a donor, donor advisor, or related person? Section 501(c)(7) organizations. Enter			30	3524	3:30
10 a	Section 501(c)(7) organizations. Enter. Initiation fees and capital contributions included on Part VIII, line 12	10a				
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	Section 501(c)(12) organizations. Enter.					
	Gross income from members or shareholders	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against	ا ا				
	amounts due or received from them.)	11b	10440	10-		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lie	u of F	orm 1041?	12a	N. work	C 30-423

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body			2.33
b	Enter the number of voting members that are independent		ing (s	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	3."."» 3."		
	any other officer, director, trustee, or key employee?	2		✓
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors or trustees, or key employees to a management company or other person?	3		✓
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		✓
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		✓
6	Does the organization have members or stockholders?	6	✓	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members			
	of the governing body?	7a	✓	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		✓
8	Did the organization contemporaneously document the meetings held or written actions undertaken during		(EV)	3334
	the year by the following			
а	The governing body?	8a	/	
þ	Each committee with authority to act on behalf of the governing body?	8b	✓	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached			
500	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9a	✓	
Rev	tion B. Policies (This Section B requests information about policies not required by the Inte- enue Code.)	ernal		
	Silus Couc.,		1	F
100	Dane the americation beautiful state of the	10-	Yes	No
	Does the organization have local chapters, branches, or affiliates?	10a		
U	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the	100		
••	form?	11	1	
11A	Describe in Schedule O the process, if any, used by the organization to review this Form 990	2.33		1.2.3
	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	1	10077
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give			
	rise to conflicts?	12b		✓
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe in Schedule O how this is done	12c		<u>✓</u>
13	Does the organization have a written whistleblower policy?	13	✓	
14	Does the organization have a written document retention and destruction policy?	14	✓	**************************************
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		Vij	77.742
а	The organization's CEO, Executive Director, or top management official	15a		
Ь	Other officers or key employees of the organization	15b	✓	7 F 2 T 4
	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions)	100	ı	
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement	(3/4.)	X. 4	
	with a taxable entity during the year?	16a	12 At	✓
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate	1	JV	
	its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b	···· 7	
Sec	tion C. Disclosure	TOD		
17	List the states with which a copy of this Form 990 is required to be filed ▶ WI, WA, TX			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c	1/3/0	anly)	
	available for public inspection. Indicate how you make these available. Check all that apply	,,(U)3 I	J1119)	
	☐ Own website ☐ Another's website ☑ Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict	of inte	arpet	
	policy, and financial statements available to the public	O: 11110	U31	
20	State the name, physical address, and telephone number of the person who possesses the books and reco	rds of	the	
	organization: ► Brian White, 1155 Observatory Dr. Rm. 333, Madison, WI, 53706, Tel: 608-204-9960			

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed.

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors, institutional trustees, officers, key employees; highest compensated employees, and former such persons

Compensated employees, and former such personal Check this box if the organization did not contain the containing of		any c	curre	ent	offi	cer, d	lirec	tor, or trustee.		
(A)	(B)			(0	C)			(D)	(E)	(F)
Name and Title	Average hours per					that ap		compensation	Reportable compensation	Estimated amount of
	week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
Dr. William Fitzhugh President			1	1				-0-	-0-	-0-
Dr. Julian Dierkes Vice-President for External Relations			1	1				-0-	-0-	-0-
Dr. Christopher Atwood Vice-President for Member Services			1	1				- 0-	-0-	-0-
Christine Wright Treasurer				1				-0-	-0-	-0-
Dr. Elizabeth Endicott Secretary		1		1				-0-	-0-	-0-
Dr. Nancy Nix University of Alaska Anchorage Rep.			/					-0-	-0-	-0-
Dr. Jeannine Davis-Kimball American Eurasian Research Institute Rep.	1		<i>,</i>					-0-	-0-	-0-
Mrs. Tserinpil Ariuna Arts Council of Mongolia Rep.			,				Г	-0-	-0-	-0-
Dr. Scott Langton Austin College Rep.			<u>`</u>					-0-	-0-	-0-
Dr. Thomas Barfield Boston University Rep.			▼					-0-	-0-	-0-
Dr. Stephan V. Kalmykov Buryat State University Rep.			/					-0-	-0-	-0-
Dr. Denis Ojima Colorado State University Rep.			1					-0-	-0-	-0-
Dr. Gordon Jacoby			Ť	-				-0-	-0-	-0-
Columbia University Rep. Mr. Otgonbat Barkhuu			✓					-0-	-0-	-0-
Global Leadership University Rep. Dr. Edward Shultz			√	_		-	-	-0-	-0-	-0-
University of Hawaii at Manoa Rep. Dr. Carla Freeman			✓		-			-0-	-0-	-0-
Johns Hopkins University Rep.	l		V		[1	l		

Part VII Sec	ction A. Officers, Directors, Tru	istees, ney	EIIIP	ioye			u ing	Hes			
	(A)	(B)			•	C)			(D)	(E)	(F)
	Name and title	Average hours per week	individual trustee or director	c Institutional trustee	Officer	Rey employee	Highest compensated employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
	idge College Rep.			1					-0-	-0-	-0
Dr. Jack Weathe Macalester Coll	ege Rep.			√					-0-	-0-	-0
Dr. Cliff Montag Montana State U				✓					-0-	-0-	-0
	sity of Mongolia Rep.			✓					-0-	-0-	-0
Mr. Steve Saund North America I	ders Mongolia Bus. Cou. Rep.			/					-0-	-0-	-0
Dr. Timothy May North Georgia C	y College & Sta. Uni. Rep.			/					-0-	-0-	-0
Mr. John Willian Principia Colleg				1					-0-	-0-	-0
Dr. Steven Lewi Rice University	-			/					-0-	-0-	-0
Dr. Tony Boyde Royal Roads Un				1					-0-	-0-	-0
Dr. Craig Janes Simon Fraser U				√					-0-	-0-	-0
Dr. John Olsen University of Ar	izona Rep.			1					-0-	-0-	-0
Dr. John Woods University of Ch		,		1				\	-0-	-0-	-0
Dr. Nancy Abelr University of III.	nan Urbana-Cham. Rep.			1					-0-	-0-	-0
	er of individuals (including but is compensation from the organization from the organization)			ose	list	ed a	above	► e) wl	67,774 ho received me	-0- ore than \$100,00	-0 00 in

3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual	3 ✓
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such	
	Individual,	4 🗸

	162	140
3		✓
227		
	1500	
4		✓
1633		62/2
5		✓

Section B. Independent Contractors

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization.

(A) Name and business address	(B) Description of services	(C) Compensation

Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ▶ -0-



	990 (20	•							Page 9
Par	t VIII	Statement of Re	venue]
						(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
nts nts	1a	Federated campaigns		1a	-0-		100		
grants nounts	b	Membership dues		1b	2,695				
giffs, Ilar an	C	Fundraising events		1c	-0-				
<u>i</u> g	d	Related organizations		1d	-0-				
Sims	е	Government grants (contri	butions).	<u>1e</u>	(4,860)				
e ţi	f	All other contributions, gifts, g							
Contributions, gifts, grants and other similar amounts		and similar amounts not inclu-		1f	33,500 -0-				
Contributions, and other simi	g	Noncash contributions include Total . Add lines 1a–1f	d in lines 1a-1	1 \$		31,335			
	 '''	Total: / tot	· · · · · · · · · · · · · · · · · · ·	•	Business Code	01,333 08002 5N3	7		
ē	2a	Educational Seminar/	Tour		900099	9,600	9,600	-0-	-0-
Æ	b	Logistical Support Se	rvices		900099	1,054	1,054	-0-	-0-
<u>ë</u>	C	Educational Materials			900099	441	441	-0-	-0-
Ser	ď	***************************************							
Ē	е	••••••							
Program Service Revenue	f	All other program service	ce revenue						
	9	Total. Add lines 2a-2f			>	11,095			
	3	Investment income (inc				597	597		
	١,	other similar amounts)			-0-	-0-	-0- -0-	-0-	
	5	Income from investment o Royalties	t bon	a proceeas	-0-	-0-	-0-	-0-	
		, , , ,	(ı) Real		(II) Personal	14:17:18:19:74:			, and the second
	6a	Gross Rents		-0-	-0-				
	ł	Less rental expenses		-0-	-0-				
		Rental income or (loss)		-0-	-0-				
	d	Net rental income or (lo	oss) .		▶	-0-	-0-	-0-	-0-
	7a	Gross amount from sales of	(i) Securitie	s	(II) Other				
	1	assets other than inventory		-0-	-0-				
	b	Less cost or other basis							
	1	and sales expenses .		-0-	-0-				
		Gain or (loss)		<u>-0-</u>	-0-	-0-	-0-		
6)	l _	Net gain or (loss)		•	· · · · · · · · · · · · · · · · · · ·	-0-	-0-	-0-	-0-
nue	8a	Gross income from events (not including \$	fundraisin	g		9000			
eve	1	of contributions reported		9					
ď	1	See Part IV, line 18		"a	-0-				
Other Reve	b	Less direct expenses		b	-0-	1			
δ	c	Net income or (loss) fro	m fundrais	ıng e	vents , , 🕨	-0-	-0-	-0-	-0-
	9a	Gross income from gam	ing activitie	s					
	1	See Part IV, line 19		а	-0-				
		Less. direct expenses,			-0-				
	1	Net income or (loss) fro			ities 🕨	-0-	-0-	-0-	-0-
	10a	Gross sales of inve			_				
	.	returns and allowances			-0- -0-			and the second of	
		Less: cost of goods sold b [Net income or (loss) from sales of inventor			L	-0-	-0-	-0-	0
	۳	Miscellaneous Reve	Veriti	Business Code	-0-	-0-	-0-	-0-	
	11a				33				
	b								
	_ c								
	d	All other revenue , ,							
	1	Total. Add lines 11a-1			•				
	12	Total revenue. See ins	tructions		<i>.</i> . >	43,027	11,692	-0-	-0-

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

	All other organizations must complete co		ot required to com	plete columns (B),	(C), and (D).
	not include amounts reported on lines 6b, , 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	-0-	-0-		
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	40,500	40,500		
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16	15,750	15,750		
4	Benefits paid to or for members	-0-	-0-	E S. 8 2	
5	Compensation of current officers, directors, trustees, and key employees	61,584	23,538		-0-
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	-0-	-0-	-0-	-0-
7	Other salaries and wages	-0-	-0-	-0-	-0-
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	-0-	-0-	-0-	-0-
9	Other employee benefits	-0-	-0-	-0-	-0-
10	Payroll taxes	18,723	10,367	8,356	-0-
11 a	Fees for services (non-employees). Management	-0-	-0-	-0-	-0-
b	Legal	-0-	-0-	-0-	-0-
С	Accounting	2,100	-0-	2,100	-0-
d	Lobbying	-0-	-0-	-0-	-0-
e	Professional fundraising services See Part IV, line 17	-0-			-0-
f	Investment management fees , , , ,	-0-	-0- -0-	-0-	-0-
	Other	110	-0- 110	-0- -0-	-0- -0-
12 13	Advertising and promotion	1,963	460	1,503	-0-
14	Office expenses	916	159	757	-0-
15	Royalties	-0-	-0-	-0-	-0-
16	Occupancy	-0-	-0-	-0-	-0-
17	Travel	6,172	580	5,592	-0-
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	-0-	-0-	-0-	-0-
19	Conferences, conventions, and meetings .	1,600	1,600	-0-	-0-
20	Interest , , , , , , , , , , , , , , , , , , ,	-0-	-0-	-0-	-0-
21	Payments to affiliates	-0-	-0-	-0- -0-	-0-
22 23	Depreciation, depletion, and amortization. Insurance	3,488	-0-	3,488	-0- -0-
				9,400	
24	Other expenses Itemize expenses not covered above (Expenses grouped together				
	and labeled miscellaneous may not exceed				
	5% of total expenses shown on line 25 below.)				
а	Library Books	4,223	4,223	-0-	-0-
b	Mongolia Office Staff Salaries & Taxes	26,776		-0-	-0-
C	Mongolia Office Expenses	1,515			-0-
d	Mongolia Office Conferences/Seminars Mongolia Office Travel	15,014 2,712	15,014 2,712	-0-	-0-
e	All other expenses Miscellaneous	4,387	3,796	-0- 591	-0-
f 25	Total functional expenses. Add lines 1 through 24f	207,533			-0- -0-
26	Joint costs. Check here ▶ ☐ if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation		,	50,733	-0-

Part X **Balance Sheet** (A) Beginning of year End of year 619 414 1 Cash—non-interest-bearing 174,661 215,954 2 Savings and temporary cash investments 24.347 148,051 3 Pledges and grants receivable, net . . . -0--n-4 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of **-**n-Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete -0--0--0-7 Assets 7 Notes and loans receivable, net -0--0-Inventories for sale or use . . 8 Prepaid expenses and deferred charges . -0-9 -0-Land, buildings, and equipment. cost or 10a 10a other basis Complete Part VI of Schedule D -0-10c -0b Less accumulated depreciation 10b 1,848 11 1,848 11 Investments-publicly traded securities -0--0-12 12 Investments—other securities. See Part IV, line 11 -0--0-13 13 Investments-program-related See Part IV, line 11 -0-14 -0-14 Intangible assets -0-15 -0-15 Other assets. See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 34) 366,267 201,475 16 14,105 17 13.819 17 Accounts payable and accrued expenses -0-18 -0-18 -0-19 -0-19 Deferred revenue , , , , , , , -0-20 -0-Tax-exempt bond liabilities 20 -0-Liabilities 21 Escrow or custodial account liability. Complete Part IV of Schedule D Payables to current and former officers, directors, trustees, key 22 employees, highest compensated employees, and disqualified -0--n-23 -0-23 Secured mortgages and notes payable to unrelated third parties . . . -0-24 -0-24 Unsecured notes and loans payable to unrelated third parties , . . Other liabilities Complete Part X of Schedule D -0-25 -0-Total liabilities. Add lines 17 through 25 , , , , 26 14,105 13.819 Organizations that follow SFAS 117, check here ▶ □ and Net Assets or Fund Balances complete lines 27 through 29, and lines 33 and 34. 27 27 28 28 Temporarily restricted net assets 29 Permanently restricted net assets Organizations that do not follow SFAS 117, check here ▶ ☑ and complete lines 30 through 34. 352,162 222,731 30 Capital stock or trust principal, or current funds 30 -0--0-31 31 Paid-in or capital surplus, or land, building, or equipment fund . . . 129,431 (164,506)32 32 Retained earnings, endowment, accumulated income, or other funds 187,656 352,162 33 33 Total liabilities and net assets/fund balances 201,475 366,267

Pai	t XI Financial Statements and Reporting			
			Yes	No
1	Accounting method used to prepare the Form 990: Cash Accrual Other			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in		1989), i	
	Schedule O.	200		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a	✓	
þ	Were the organization's financial statements audited by an independent accountant?	2b		✓
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of			
	the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	✓	37555
	If the organization changed either its oversight process or selection process during the tax year, explain in		gradica).	
	Schedule O.			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were			465
	issued on a consolidated basis, separate basis, or both	227		. 10
	☑ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis		200	25 (2)
3а	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in			
	the Single Audit Act and OMB Circular A-133?	3a		✓
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the			
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	3b		

Form **990** (2009)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization Employer identification number 55-0799211 **American Center for Mongolian Studies** Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). ☐ A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An organization that normally receives: (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions-subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. **b** Type II c Type III-Functionally integrated e 🗆 By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). If the organization received a written determination from the IRS that it is a Type II, Type III, or Type III supporting f Since August 17, 2006, has the organization accepted any gift or contribution from any of the a following persons? (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and Yes No (iii) below, the governing body of the supported organization? 11g(i) (ii) A family member of a person described in (i) above? 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? . 11g(iii) Provide the following information about the supported organization(s). (i) Name of supported (ii) EIN (iii) Type of organization (iv) Is the organization (v) Did you notify (vi) is the (vii) Amount of the organization in organization (described on lines 1-9 in col (i) listed in your organization in col. support col (i) of your governing document? (i) organized in the US? above or IRC section support? (see instructions)) Yes No Yes Yes No No (A) (B) (C) (D) (E)

Total

0.40%-0.80%-0.8

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support (a) 2006 **(b)** 2007 (c) 2008 (d) 2009 (e) 2010 (f) Total Calendar year (or fiscal year beginning in) grants, contributions, Gifts. membership fees received. (Do not 110,747 124,135 414,838 426,966 42,430 1,119,116 include any "unusual grants.") . . . 2 Tax revenues levied for organization's benefit and either paid to or expended on its behalf . . . The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 3. . . . 110,747 124,135 414,838 426,966 42,430 1,119,116 10 AU 30 AU WAY. The portion of total contributions by each person (other than governmental unit publicly or -0supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) Public support. Subtract line 5 from line 4. 1,119,116 Section B. Total Support **(b)** 2007 (a) 2006 (c) 2008 (d) 2009 (e) 2010 (f) Total Calendar year (or fiscal year beginning in) 110.747 124,135 7 Amounts from line 4 414,838 426,966 42,430 1,119,116 8 Gross income from interest, dividends, payments received on securities loans. -0-300 1,567 4,785 597 7,249 rents, royalties and income from similar sources 0 Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income. Do not include gain or loss from the sale of capital assets -0-1.000 330 -0--0-1,330 (Explain in Part IV.) **Total support.** Add lines 7 through 10 11 1,127,695 Gross receipts from related activities, etc. (see instructions) 12 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) Section C. Computation of Public Support Percentage Public support percentage for 2010 (line 6, column (f) divided by line 11, column (f) 14 14 99.239 % 15 % 331/3% support test - 2010. If the organization did not check the box on line 13, and line 14 is 331/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization \square b 331/3% support test - 2009. If the organization did not check a box on line 13 or 16a, and line 15 is 331/3% or more. check this box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test - 2010. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported b 10%-facts-and-circumstances test - 2009. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II.)

	If the organization fails to qualify	under the te	sts listed belo	ow, please co	omplete Part	II.)	
Section	on A. Public Support						
Calen	dar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received (Do not include any "unusual grants.")					į į	
2	Gross receipts from admissions, merchandise	· · · · · · · · ·					
	sold or services performed, or facilities					ļ i	
	furnished in any activity that is related to the		ł				
3	organization's tax-exempt purpose Gross receipts from activities that are not an					-	
3	unrelated trade or business under section 513		1				
							
4	Tax revenues levied for the						
	organization's benefit and either paid						
	to or expended on its behalf						
5	The value of services or facilities			ŀ			
	furnished by a governmental unit to the		ł				
	organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3		1				
	received from disqualified persons .		L				
b	Amounts included on lines 2 and 3						
	received from other than disqualified					l i	
	persons that exceed the greater of \$5,000					l l	
	or 1% of the amount on line 13 for the year						
C	Add lines 7a and 7b						
8	Public support (Subtract line 7c from		V 70 8 9 3 4 4 5 8	3.50			
	line 6.)			7.79			
Secti	on B. Total Support		4				
Calen	dar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends,		1				
	payments received on securities loans, rents,					1	
	royalties and income from similar sources .						
b	Unrelated business taxable income (less	·					
_	section 511 taxes) from businesses						
	acquired after June 30, 1975					ļ .	
c	Add lines 10a and 10b	-				 	
11	Net income from unrelated business		 	 			
••	activities not included in line 10b, whether						
	or not the business is regularly carried on	ł			1		
10	• ,	<u></u>	<u> </u>	 			
12	Other income. Do not include gain or loss from the sale of capital assets			Į	1		
	(Explain in Part IV.)]	1		
13	Total support. (Add lines 9, 10c, 11,		 	 		1	
13	and 12.)						
14	First five years. If the Form 990 is for the		a's front soons	d thurst format	on fifth tour u	1	- F01/a\/2\
14	organization, check this box and stop he	•	•		•		• • • • • • • • • • • • • • • • • • • •
Conti							· · P □
	on C. Computation of Public Suppo			10 (6)		1457	
15 16	Public support percentage for 2010 (line		-			15	<u> </u>
16 Secti	Public support percentage from 2009 Sc on D. Computation of Investment In			· · · · · · · · · · · · · · · · · · · 		101	
			7	v lino 12 octiv	mn (fl)	17	%
17 10	Investment income percentage for 2010	•		-			
18	Investment income percentage from 2009 331/3% support tests—2010. If the organ						
19a	17 is not more than 331/3%, check this box						
			_	-			 -
b	331/3% support tests – 2009. If the organization 19 is not more than 331 mg/s, shock this						
20	line 18 is not more than 331/3%, check this Private foundation . If the organization d						
-263	FOVAIR IOUGGAGOO II DE DIGADIZATION O	птики спеска	(2) 11/1100 44		COURTER THIS LICE	CULT SEE HISHIIL	/UU/US P

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raue	-

Part IV	Supplemental Information. Complete this part to provide the explanations required by Part II, line 10, Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).
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SCHEDULE F (Form 990)

Statement of Activities Outside the United States

► Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047 Open to Public

Department of the Treasury Internal Revenue Service Name of the organization

American Center for Mongolian Studies

Employer identification number 55-0799211

Inspection

Part	General Information of Form 990, Part IV, line 14		outside the Un	ited States. Comple	ete if the organization a	inswered "Yes" to
1	For grantmakers. Does the assistance, the grantees' eligit grants or assistance?					the
2	For grantmakers. Describe in United States.	n Part V the org	ganization's prod	cedures for monitorin	g the use of grant fur	nds outside the
3	Activities per Region. (The follo	owing Part I, line	3 table can be o	duplicated if additiona	l space is needed.)	
	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) if activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
(1)	Mongolia	11	8	Program services	Resource center	51,601
(2)		<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>				
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
(10)						
(11)						
(12)			-			
(13)						
(14)						
(15)						
(16)						
(17)						
3a	Sub-total					
b	Total from continuation sheets to Part I					
с	Totals (add lines 3a and 3b)	1	8	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	3.5	51,601

Schedule F (F	Schedule F (Form 990) 2010
Part II	Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990,
	Part IV, line 15, for any recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000
	Part II can be duolicated if additional space is needed.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)								
Ñ								
(6)								
(4)								
(8)								
(13)								
(12)								
(61)								
(5.4)								
(15)								
(16)								

Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter N

Enter total number of other organizations or entities 8

Schedule F (Form 990) 2010

Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed. Schedule F (Form 990) 2010

Part III Grants ar

(a) Type of grant or assistance	of grant or assistance (b) Region (c) Number of recipients	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1) Fellowship to Individual	Canada	1	15,000 Check	Check	.		
(2) Fellowship to Individual	France	1	750	750 wire-transfer	-0-		
(3)							
(4)							
(5)							
(9)							
(2)							
(8)							
(6)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(11)							
(18)							
						Sched	Schedule F (Form 990) 2010

Page	Δ

Part	IV	Foreign Forms		
1	the c	the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign poration (see Instructions for Form 926)	☐ Yes	□ No
2	may Rece	the organization have an interest in a foreign trust during the tax year? If "Yes," the organization be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and eight of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a Owner (see Instructions for Forms 3520 and 3520-A)	☐ Yes	□ No
3	the d	the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," organization may be required to file Form 5471, Information Return of U.S. Persons with respect to ain Foreign Corporations. (see Instructions for Form 5471)	☐ Yes	□ No
4	qual Retu	the organization a direct or indirect shareholder of a passive foreign investment company or a ified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, irrn by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see auctions for Form 8621)	☐ Yes	□No
5	the	the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," organization may be required to file Form 8865, Return of U.S. Persons with respect to Certain ign Partnerships. (see Instructions for Form 8865)	☐ Yes	□No
6	"Yes	the organization have any operations in or related to any boycotting countries during the tax year? If the organization may be required to file Form 5713, International Boycott Report (see Instructions form 5713)	☐ Yes	□ No

Part V

Supplemental Information

Complete this part to provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

Center Operations in Mongolia: The Resident Director in Mongolia is responsible for maintaining financial records for the office in Mongolia.
Each month she submits a copy of the accounting books and scans of receipts. The US Director does a preliminary review of the records
concurrently with his preparation of the US books. Both are then submitted to the Executive Director for review. The office in Mongolia
generally receives transfers on a reimbursement basis, and expenses are booked in the month they accrued in both the US and Mongolia
financial records. Occasionally the Mongolia office requests an advance of funds to cover expenses, and later reimbursements are adjusted
accordingly by subtracting out advance amounts. The Mongolia office maintains four accounts at a banking institution, two in US dollars
and two in Mongolian tugriks. The office also maintains a petty cash account in dollars and tugriks that normally should not exceed \$200 in
balance, although exceptions to this rule do occur when alternative methods of receiving or distributing payments are not available. All
transactions are recorded with receipts and monthly statements from the banking institution. Each year the Executive Director or US
Director visits the Mongolia office to review operations and verify records are being handled and stored properly.
Fellowship selection and oversight: Each fellow must submit an application to an competitive process which includes review of personal
statements and academic or professional achievement by a selection committee. After the selection committee makes their recommen-
dations for awards, awardees are notified in writing of their selection. Each awardee must complete administrative paperwork which
includes a liability waiver form, payment information, and the general terms and conditions of the award. After receiving the required paper-
work, the ACMS disburses the award amount minus \$250 to be held until successful completion of the program and submission of a final
report on the fellowship experience. Fellowship awards are intended to cover travel and living costs associated with conducting research
or study in Mongolia. All fellows are required to maintain communication with the Resident Director in Mongolia and are expected to meet
with her at least once during their stay in the country. In the current year one student from Canada received an award for the ACMS
Research Fellowship, which is a program to support doctoral and post-doctoral field research and is supported by a grant from the Henry
Luce Foundation. One student from France also received an award for the ACMS Summer Language Program, which is an award intended
to defray the costs of participating in an intermediate intensive Mongolian language program. This particular award was funded using
unrestricted program funds.

SCHEDULE I (Form 990)

Nar Nar

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

2009

OMB No 1545-0047

Department of the Treasury Internal Revenue Service	י	complete ii die orga	e organization answered tes to Form 990. ▶ Attach to Form 990.	_	850, Fdit IV, mie z i 01 zz.		Open to Public Inspection
Name of the organization	1 1 1					Employer ident	Employer Identification number
American Center for Mongolian Studies Pertal General Information on Grants and Assistance	on Grants and	Assistance				cc	113870
8 8 8	in records to subs award the grants c zation's procedure	tantiate the amou or assistance?	nt of the grants or as ne use of grant funds	isstance, the grantee in the United States.	amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and s? or grant funds in the United States.	grants or assistance, ar	and . Z Yes No
ē	sistance to Government 21, for any rec	vernments and ipient that received additional space	and Organizations in the received more than \$5,0 space is needed.	he United States. (and Organizations in the United States. Complete if the organization answered "Yes" to received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use space is needed	nization answered eceived more than	"Yes" to \$5,000. Use
1 (a) Name and address of organization or government	(e)	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
 Enter total number of section 501(c)(3) and government organizations Enter total number of other organizations 	01(c)(3) and govern ganizations	ment organizations					
10-	uction Act Notice, s	ee the Instructions	for Form 990.		Cat No. 50055P	9	Schedule I (Form 990) 2009
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Schedule I (Form 990) 2009

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.

Use Part IV and Schedule I-1 (Form 990) if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV appraisal, other)	(f) Description of non-cash assistance
ACMS Reseach Fellowship	က	23,000	Ġ		
ACMS US-Mongolia Field Fellowship	m	8,250	Ġ		
ACMS Faculty Research Fellowship	8	7,250	-0-		
ACMS Summer Language Fellowship	2	2,000	-0-		
Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.	te this part to pr	ovide the information	on required in Part	, line 2, and any other	additional information.
Fellowship selection and oversight: Each fellow must submit an application to an competitive process which includes review of personal	nust submit an ap	plication to an comp	etitive process whic	h includes review of per	sonal
statements and academic or professional achievement by a	ement by a selecti	on committee. After (the selection commi	selection committee. After the selection committee makes their recommen-	-uə
dations for awards, awardees are notified in writing of their selection. Each awardee must complete administrative paperwork which	ng of their selectic	on. Each awardee mu	ist complete adminis	trative paperwork which	
includes a liability waiver form, payment information, and the general terms and conditions of the award. After receiving the required paper-	ion, and the gene	ral terms and conditi	ons of the award. Af	ter receiving the require	d paper-
work, the ACMS disburses the award amount minus \$250 to	us \$250 to be held	d until successful co	mpletion of the prog	be held until successful completion of the program and submission of a final	a final
report on the fellowship experience. Fellowship awards are		d to cover travel and	l living costs associa	intended to cover travel and living costs associated with conducting research	earch
or study in Mongolia. All fellows are required to maintain co		cation with the Resid	lent Director in Mong	mmunication with the Resident Director in Mongolia and are expected to meet with	meet with
her at least once during their stay in the country. Fellows are required to submit boarding passes to confirm compliance with the fly America	Fellows are requir	ed to submít boardir	ng passes to confirm	compliance with the fly	America
act when appropriate.					-
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SCHEDULE J-2 (Form 990)

Continuation Sheet for Form 990

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

▶ Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a. ▶ See the Instructions for Form 990.

Open to Public Inspection

Name of the Organization Employer identification number 55 **American Center for Mongolian Studies** 0799211 Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated

Employees	,			·		•			•	
(A)	(B)			((C)			(D)	(E)	(F)
Name and title	Average hours	Posit	on (c		k all	that ap		Reportable	Reportable	Estimated
	per week	우ᇗ	lns	₽ Q	G G	em Hig	Ę.	compensation from	compensation from related	amount of other
		Individual trustee or director	Institutional trustee	Officer	Key employee	P in in	Former	the	organizations	compensation
		를 들.	Š		탏	/ee c]	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization
		l IZ	3		yee	ğ		(** 2 1000 111100)		and related
		8	ste			ens				organizations
			٩			Highest compensated employee				
Dr. Erik Herron										
University of Kansas Rep.			✓		L_			-0-	-0-	-0-
Dr. Scott Gardner					ŀ		1			
University of Nebraska Rep.			1	_				-0-	-0-	-0-
Dr. Alec Stewart										
University of Pittsburgh Rep.			✓					-0-	-0-	-0-
Dr. DeWayne Frazier]									
Upper Iowa University Rep.			✓			İ		-0-	-0-	-0-
Dr. Edward Vajda										
Western Washington University			1					-0-	-0-	-0-
Dr. William Honeychurch Rep.										_
Yale University Rep.	1	}	1			ļ		-0-	-0-	-0-
Dr. Dawn Bazely				Γ		Ī				
York University	1	1						-0-	-0-	-0-
Mr. Joseph Lake			Π			İ				
At-Large Director	1	1						-0-	-0-	-0-
Dr. Saruul-Erdene		<u> </u>			T		T	-		
At-Large Director	1	1	l					-0-	-0-	-0-
Mr. Layton Croft		 					†			
At-Large Director	1	1						-0-	-0-	-0-
Dr. Morris Rossabi		 	t	\vdash	\vdash		t			-
At-Large Director		1						-0-	-0-	-0-
Dr. Charles Krusekopf			\vdash	┪	1	 		<u> </u>		
Executive Director	10		l		1			18,000	-0-	-0-
Mr. Brian White			t		۲			10,000		
US Director	40	İ			1	1	Ì	36,774	-0-	-0-
Roberta Charpentier			T	t	╅	 	\vdash	30,111		
Resident Director	40				1			13,000	-0-	-0-
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SCHEDULE O (Form 990)

Department of the Treasury

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

► Attach to Form 990.

OMB No. 1545-0047 Open to Public Inspection

Internal Revenue Service Employer identification number Name of the organization **American Center for Mongolian Studies** 55 0799211 Line A: This is a short tax year return for January 1, 2010-September 30, 2010. The American Center for Mongolian Studies will utilize the US government fiscal year for all future returns starting October 1, 2010. This change is being made to coincide with grant cycles and reporting requirements of US government supported programs, the primary source of the American Center for Mongolian Studies' public support. Part III Line 4d: Other expenses for program services include expenses for a study tour seminar, program support for the US office, including a portion of the US director's salary, and miscellaneous public outreach activities, including lectures and meetings in the US. Part VI Line 7a: Members join the organization by paying annual dues. Membership comprises students and individuals. Every three years elections are held for five "At-Large" members of the board of directors for three year terms. Active members, as defined as having paid the annual dues for the current year, are eligible to vote in these elections. Members are also eligible to nominate candidates. As of writing this, the ACMS has over 180 active members. Membership is defined in the corporate by-laws to begin September 1 and end August 30 of each year for purposes of determining a member's active or non-active status. Institutional members join the organization by paying annual dues. Institutional members may select a representative on the board of directors. Institutional representatives along with "At-Large" directors may nominate and vote for officers and members of the Executive committee. They may also, as outlined in the corporate by-laws appoint members to committees. As of writing this, the ACMS has 35 institutional members. Part VI Line 11A: After preparing the 990 form, the Executive Director sends a copy to the Executive Committee, which comprises the officers of the board, including the Treasurer. After review and consultation, the form is sent to members of the board of directors to review and comment, if any, by a designated date (usually two weeks after receiving the form).

After all comments (if any) have been received and errors (if any) have been corrected, the Executive Director receives

final approval from the Executive Committe to submit the 990 form to the IRS.

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chedule O (Form 990) 2009	Page 2

Name of the organization

American Center for Mongolian Studies

Employer identification number

55 0799211

Part VI Line 15b: The US Director and Resident Director work on annual contracts that are renewed each October based on performance in the previous year. The Executive Director generally conducts a review by surveying the directors' subordinates and discussing directly with the directors areas of success in the previous year and areas of improvement for the coming year. Contracts are sent to the Executive Committee for comment before signing. When/if hiring new employees, the process is handled through a review committee generally comprising members of the Executive Committee and any relevant key employees. Compensation is determined based on the best knowledge of market rates for a given position, the skill set required to succeed, and budget considerations. Part VI Line 19.: The corporate by-laws of the organization are available on the organization website, along with a list of institutional members and members of the board of directors (see www.mongoliacenter.org). The organization also maintains a policy manual to guide operations. This manual is available upon request but is not normally shared with the public. It is, however, available to all officers, directors, and employees. Within this policy manual are the conflict of interest policy, as well as other rules and regulations. At each annual meeting of members, which is open to the public, a general statement of the organization's finances are presented by the Treasurer or other officer present at the meeting. Other financial records are available upon request but are not normally shared with the public. Part XI Line 2c: Until the current tax year the finanical statements of the organization were reviewed on a monthly basis by the Execuitive Director and on a quarterly basis by the Treasurer. During the current tax year work began to constitute a committee for quarterly review of the financial statements. During a meeting of the Exective Committee in November 2010, the proposal was made to have the Executive Committee, which comprises the officers of the board, fulfill this responsibility. During FY2011 these quarterly committee reviews will begin. The Executive Director submits an annual financial statement to the board for review at the annual meeting and by e-mail. This statement is in addition to the 990 form, because the annual meeting is generally held in spring before filing the 990. The organization is not required to submit to an annual A-133 audit; however, it does receive a review of its books and financial statements by an independent auditing firm. The review reports are provided to the President, Treasurer, and Executive Director in original hardcopy form when received, and copies are distributed to other board members at the



annual meeting.